STATE OF CALIFORNIA - PERSONNEL ADMINISTRATION TRAVEL EXPENSE CLAIM STD 262 (REV. 6-93c)					See Instructions and *Privacy Statement below					Page		of	Pages		
STD.262 (REV. 6-93c) CLAIMANT'S NAME							• • • • • • • • • • • • • • • • • • • •	SECURI			1	DEPART			
			•				JOUIAL	JECOM	111	OMBLIC					
Lynn L. Jacobs POSITION					Bargainii	Bargaining Unit # DIVISION OR BUREAU			U		HCD	INDEX	PCA		
				-	99		ve Office		_			5103 50001			
Director RESIDENCE ADDRESS						99		UARTER:		DRESS	TELEPHONE NUMBER			L	
ICLOIL	JENOL	ADDICEOU											16 445-4		
CITY STATE					ZIP CODE	1800 Third Street, Suite 450				uite 400		STATE ZIP CODE			
Sacramento CA						Sacramento					CA	95811			
			MEALS		(6) (7) TRANSPORTAT			ON		(8)	(9)				
(1) MONT	H/YEAR	[(3) 	(4)	(5) N	VIEALS	T	. (6)	(1)	1100	,			1 (8)	. (3)	
Ma	ır-09	LOCATION				0.т., ц/т,		(A)	(B)	(C)		(D)		TOTAL	
(2)		WHERE EXPENSES		BREAK-		NC, RELO	INCIDEN-	COST OF	TYPE	CARFARE TOLLS,	PRIVAT	E CAR USE	BUSINESS	EXPENSES	
DATE	TIME	WERE INCURRED	LODGING	FAST	LUNCH	DINNER	TALS	TRANS	USED	PRKG_	MILES	AMOUNT	EXPENSE	FOR DAY	
3/3	1407	Sacramento				ļ			PC	8.75	4	2.20		10.95	
	1606	Sacramento				·			PC	6.00	4	2.20		8,20	
3/4	0941	Sacramento	_						РС	6.00	.4	2.20		8.20	
	1148	Sacramento							PC	7.50	4	2.20		9.70	
3/5	0746	Sacramento							РС	6.00	4	2.20		8.20	
3/6	1300	HQ to Sacrramento A/P							PC		12	6.60	, .	6.60	
		Sacramento to Burbank		-								-			
. 3/9		Ventura / Meetings										-		-	
3/10		Los Angeles						17.88	RC			-			
		Los Angeles to Burbank A/P										٠.		-	
	2130	Burbank to Sacramento							PC	27.00	12	6.60		. 33.60	
		End of trip										. -		-	
												-		-	
												-		-	
(10)		SUBTOTALS	-	-		_		17.88	-	61.25	44.00	24.20	-	85.45	
COLU	MN CC	DE (ACCTG: USE ONL	Y)		Page 1915	7.153			35.5		2167-11		φ.	400.00	
		CLAIM TOTAL			· ·						1		\$	103.33	
(11) F	PURPO	OSE OF TRIP, REMAR r Jacobs had a meetin	RKS AND D	OETAILS	or Sooroi	ton, Mari	iorio Bort	o Borm	ano	nt	(12) NOR	MAL WORK I	HOURS M - 5:00	РM	
		fing with Senator Steir									(13) PRIV		E LICENSE N		
TCAF	. Peri	manent Source Briefin	g with Carl	Guardin	o. 3/5 -	Meeting	with Ass	embly N	1emb	per					
Horna	a Torre	es (Housing Committee	e Chair) 3/	6 - Drov	e from F	CD HQ	to Sacra	mento A	/P. :	3/9 -	(14) MILE	AGE RATE C			
		etings. 3/10 - Los An ² . Flight from Burbank				eaking E	.ngagem	ent. Los	s Ang	jeies to	Ballage at an e		0.55	COFFICE	
Duiba	ain Avi	I light from burbank	to Oacram	ionto ma	•						X 72000 4200		100	OFFICE	
											mplian de amenda institution	PAID BY REV	/. FUND CHE	CK No.	
	of the Sta	Y CERTIFY That the above is a traction of California. If a privately ow the vehicle was equal to or greated and 2754 participates.	vned vehicle was ter than the rate	used, and it claimed, and	f mileage rate d that I have	es exceed th	e minimum ra	ate, I certify t	he cos	st of					
0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat CLAIMANT'S SIGNATURE DATE				. Jon usaye.	(16) SIGNA	NATURE OF OFFICER APPROVING TRAVEL AND PAYM						MENT DATE			
Lynn L. Jacobs 03/2					26/09	Elliott I	lliott Mandell						03/26/09		
		PENSE AUTHORIZATION - SIGI	NATURE and TI	TLE (See Ite	m 17 on rev	erse)							DATE		

		XPENSE CLAIM					ns and * ent belov	•			Page		of	Pages	
STD.262 (REV. 6-93c) CLAIMANT'S NAME								***************************************		UMBER	1	DEPARTI	of Pages MENT		
Lynn L. Jacobs							SOCIAL SECURITY NUMBER					HCD			
POSITION					Bargainir	ng Unit#	DIVISIO	N OR BU	REA	U		1.102	INDEX	PCA	
Director					E	99	Executi	ve Office	9				50001 5103		
RESIDENCE ADDRESS								JARTER:	S AD	DRESS		TELEPHO	ONE NUM	BER	
								nird Stre	et, S	uite 450		9	16 445-4775		
CITY STATE					ZIP CODE	P CODE CITY						STATE	ZIP CODE		
Sacra	mento			CA			Sacram	ento				CA	98	5811	
(1) MONTH /YEAR		(3)		(5) N	MEALS		(6)	(7)	TRANSPORTATION .			H-1	(8)	(9)	
Mar-09				•		O.T., L/T,		(4)	(B)	(C)		(D)			
(2)	r-09	LOCATION WHERE EXPENSES		BREAK-		NC, RELO. OR	. INCIDEN-	(A) COST OF	TYPE	CARFARE	PRIVAT	E CAR USE	BUSINESS	TOTAL EXPENSES	
DATE	TIME	WERE INCURRED	LODGING	FAST	LUNCH	DINNER	TALS	TRANS	USED		MILES	AMOUNT	EXPENSE	FOR DAY	
3/11	0838	Sacramento							PC	10.50	4	2.20		12.70	
	1235	Sacramento			<u> </u>				PC	7.50	4	2.20		9.70	
3/16	1012	Sacramento							РС	3.00	4	2.20		5.20	
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(10)		SUBTOTALS		-	-	-	· -	-	<u> -</u>	21.00	12.00	6.60	-	27.60	
COLU	MN CO	DE (ACCTG: USE ONL	Y) HEELE	uga interit				<u></u>			e Bar		o de la companya de l	27.60	
(44) [VIDDO	CLAIM TOTAL	ONG WID I	DETAIL S						<u> </u>	\$ 27.60				
(11) PURPOSE OF TRIP, REMARKS AND DETAILS 3/11- Director Jacobs attended Assembly Committee on Housing and Community Development											8:00 AM - 5:00 PM				
Inforn	nationa	al Hearing. Meetings	with Assem	ibly Mem	ber Fon	g and Vi	ctoria Br	adshaw.	3/1	6 -	(13) PRI\	ATE VEHICLI	E LICENSE N	lo.	
Perm	anent :	Source Briefing with S	senator Dut	ton.							(14) MILE	AGE RATE C	LAIMED		
											.,,		0.55		
											kan zahitan Dani	NCY ACCOUNTING OFFICE USE ONLY			
												PAID BY REV	. FUND CHE	CK No.	
	of the Sta operating	Y CERTIFY That the above is a to the of California. If a privately ow the vehicle was equal to or great	vned vehicle was ster than the rate	s used, and if claimed, and	f mileage rate d that I have	es exceed the	e minimum ra	ate, I certify t	he co	st of					
0750, 0751. 0752, 0753 and 0754 pertaining to vehicle safety and seat CLAIMANT'S SIGNATURE DATE				belt usage.	(16) SIGNA	ATURE OF O	FFICER API	PROVI	AND PAYMENT DATE						
Lynn Lylacobs 03/26/09 Elliott Mandell								03/26					09.		
Lynn L. Jacobs U3/20/09 Elliott Maridell (17) SPECIAL EXPENSE AUTHORIZATION - SIGNATURE and TITLE (See Item 17 on reverse)										DATE					

STATE OF CALIFORNIA - PERSONNEL ADMINISTRATION